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RULE				

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**** CONTINUING DATA *******

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which is a CON of 07/499,210 03/19/1990 ABN
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which is a CIP of 06/706,562 02/28/1985 ABN
which is a CIP of 06/558,109 12/05/1983 ABN

**** FOREIGN APPLICATIONS *******

FRANCE 84 16013 10/18/1984
UNITED KINGDOM 84 29099 11/16/1984
UNITED KINGDOM 83 24800 09/15/1983
UNITED KINGDOM 84 23659 09/19/1984

IF REQUIRED, FOREIGN FILING LICENSE GRANTED**** 12/18/2006**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and Acknowledged	Examiner's Signature _____ Initials _____	FRANCE	26	2	1
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TITLE DNA SEQUENCE OF THE LTR REGION OF HUMAN IMMUNODEFICIENCY VIRUS TYPE 1 (HIV-1)					
FILING FEE RECEIVED 960	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees			
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